ENTRY BLANK

PLEASE T	YPE OR PRINT	E	ntered prev	rious May Sh	ow
· V			yes yes	□ no	
△ Ms.					
☐ Mr. Art	tist Beatrice	Louis	e Mitch		180
Permanent Address 23	8650 S. Wood	lland	Rd., C1	(Last Name eveland	Last
44122	Street Tel. (4	216) 46	64-5840	City	
Zip	Area C	ode			
Temporar Studio Ad		ne as	above x	xx	
	Street			City	
	Tel. ()			
Zip	Area C	ode			
If you do	not presently live	in one	of the cour	nties of the	
Western R	eserve, which co	unty we	re you born	n in?	
Collaborat	or				
	(If Any				
If May Sho	ow entries are no	t accept	ted or not se	old:	
Artist	will pick up at N	luseum.			
☐ Museu	ım should dispos	e of.			
	ım should ship to		C.O.D. at th	is address:	
		Male Res			
Special Ins	tructions				
When nece	essary include be	low inst	ructions or	a drawing o	F

DO NOT DETACH

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information Signature

DATE

REJECTED